AN ORIENTATION TO THE GERI-RXFILES: ASSESSING MEDICATIONS IN OLDER ADULTS

**Purpose**
The Geri-RxFiles was created to assist health care professionals in assessing medication use in older adults. It is also intended to highlight potentially problematic medications in older adults based on the Beers Criteria, the STOPP Criteria, & others.

**The Beers Criteria & STOPP Criteria**
*The Beers Criteria* is a list of “potentially inappropriate” drugs in older adults; these criteria have evolved to include discussion of various clinical factors that need to be included in the equation. A similar list is **The STOPP Criteria** (STOPP = Screening Tool of Older Persons’ potentially inappropriate Prescriptions). Medications from these two lists are highlighted throughout the Geri-RxFiles to allow for easy identification. Additional medications not identified within these two lists, but potentially problematic are indicated by RxFiles.

**Familiarizing Yourself with the Geri-RxFiles**

**Table of Contents**

Here you will find a list of all the topics & their corresponding page #s or sections.

**Introduction**
The *Introduction* discusses drug therapy in older adults, highlighting various considerations for optimal prescribing & deprescribing. Practical ideas are provided to help health care providers optimize drug therapy in the older adult population including how to avoid common pitfalls like prescribing cascades.

**Acknowledgements**
In this section, we acknowledge all the individuals who contributed to the Geri-RxFiles. Their input provides invaluable perspectives & real-life experience making the Geri-RxFiles a more usable tool.

**Therapeutic Topics (Section 1 to 36)**

Seven systems are covered in the Geri-RxFiles including: cardiology, endocrine & metabolic, gastrointestinal, genitourinary, musculoskeletal & connective tissue, neurology & psychiatry, & finally respiratory. A variety of miscellaneous topics are also covered. The therapeutic topics cover both an approach to assessing & optimizing the disease or condition, as well as highlights medications that may be potentially problematic in older adults. A more detailed description is contained in the section entitled "The Anatomy of a Geri-RxFiles Therapeutic Topic".

**Tapering Information (Section 37)**

This symbol indicates that a medication should be tapered upon discontinuation. Within the tapering section you will find the rationale for tapering a medication, common withdrawal symptoms, & a suggested tapering approach. This section is divided by medication classes, with the exception of clonidine.

**Indices (Section 38 & 39)**

In these sections you will find what all the acronyms stand for, & in the Key Words Index, you will find key terms related to drugs (both brand & chemical name), diseases, & trials.

**Appendices (Sections 40 to 42)**
The Appendices contain other RxFiles resources that compare anticoagulants or anti-hyperglycemic using a traffic light colour comparison. Time-to-benefit & other select considerations are also highlighted.

**Symbols**

- **Green – Go!**
  A first-line choice. Likely well tolerated with few concerns (adverse effects, drug interactions) or perhaps has the best evidence
  
  **Yellow – Caution, slow down!**
  Careful with these medications. Monitor closely for adverse events.

  **Red – Stop, re-evaluate!**
  Determine if there are better alternatives. These medications are likely best avoided. Risks likely outweigh the benefits.
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*Topic “Under Construction” for a future edition of the Geri-RxFiles*